

Fill in this information to identify your case:

|   |                                      |             |           |
|---|--------------------------------------|-------------|-----------|
| Debtor 1  | <b>Cheryl Louise Williams-Murray</b> |             |           |
|   | First Name                           | Middle Name | Last Name |
| Debtor 2<br>(Spouse, if filing)   |                                      |             |           |
|   | First Name                           | Middle Name | Last Name |
| United States Bankruptcy Court for the: Southern District of New York (State) |                                      |             |           |
| Case number   | 19-11705                             |             |           |
|   | (If known)                           |             |           |

FILED  
U.S. BANKRUPTCY COURT  
2019 JUN 14 A 11:31  
S.D.N.Y.

☐ Check if this is an amended filing

## Official Form 106Sum

### Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

#### Part 1: Summarize Your Assets

|   |  | Your assets<br>Value of what you own |
|---|--|--------------------------------------|
| 1. <i>Schedule A/B: Property</i> (Official Form 106A/B)                   |  |                                      |
| 1a. Copy line 55, Total real estate, from <i>Schedule A/B</i> .....       |  | \$ 500,000.00                        |
| 1b. Copy line 62, Total personal property, from <i>Schedule A/B</i> ..... |  | \$ 3,278.00                          |
| 1c. Copy line 63, Total of all property on <i>Schedule A/B</i> .....      |  | \$ 503,278.00                        |

#### Part 2: Summarize Your Liabilities

|   |  | Your liabilities<br>Amount you owe |
|---|--|------------------------------------|
| 2. <i>Schedule D: Creditors Who Have Claims Secured by Property</i> (Official Form 106D)  |  |                                    |
| 2a. Copy the total you listed in Column A, <i>Amount of claim</i> , at the bottom of the last page of Part 1 of <i>Schedule D</i> ..... |  | \$ 76,440.00                       |
| 3. <i>Schedule E/F: Creditors Who Have Unsecured Claims</i> (Official Form 106E/F)  |  |                                    |
| 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of <i>Schedule E/F</i> .....                             |  | \$ 0                               |
| 3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of <i>Schedule E/F</i> .....                          |  | + \$ 6118.00                       |
| Your total liabilities  |  | \$ 82,558.00                       |

#### Part 3: Summarize Your Income and Expenses

|   |             |
|---|-------------|
| 4. <i>Schedule I: Your Income</i> (Official Form 106I)                    |             |
| Copy your combined monthly income from line 12 of <i>Schedule I</i> ..... | \$ 1,617.00 |
| 5. <i>Schedule J: Your Expenses</i> (Official Form 106J)                  |             |
| Copy your monthly expenses from line 22c of <i>Schedule J</i> .....       | \$ 2191.00  |

Debtor 1 **Cheryl Louise Williams-Murray**  
First Name Middle Name Last Name

Case number (if known) **19-11705**

**Part 4: Answer These Questions for Administrative and Statistical Records**

**6. Are you filing for bankruptcy under Chapters 7, 11, or 13?**

- ☐ No. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.  
☒ Yes

**7. What kind of debt do you have?**

- ☒ **Your debts are primarily consumer debts.** Consumer debts are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.  
☐ **Your debts are not primarily consumer debts.** You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

**8. From the Statement of Your Current Monthly Income:** Copy your total current monthly income from Official Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14.

\$ **1617.00**

**9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:**

|  | Total claim |
|--|-------------|
| From Part 4 on Schedule E/F, copy the following:   |             |
| 9a. Domestic support obligations (Copy line 6a.)   | \$ 0.00     |
| 9b. Taxes and certain other debts you owe the government. (Copy line 6b.)  | \$ 0.00     |
| 9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)  | \$ 0        |
| 9d. Student loans. (Copy line 6f.)   | \$ 1,432.75 |
| 9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.) | \$ 0.00     |
| 9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)                                       | + \$ 0.00   |
| 9g. <b>Total.</b> Add lines 9a through 9f.   | \$ 1,432.75 |

Fill in this information to identify your case and this filing:

Debtor 1 Cheryl Louise Williams-Murray  
First Name Middle Name Last Name  
Debtor 2  
(Spouse, if filing) First Name Middle Name Last Name  
United States Bankruptcy Court for the: Southern District of New York  
Case number 19-11705

☐ Check if this is an amended filing

Official Form 106A/B

## Schedule A/B: Property

12/15

In each category, separately list and describe items. List an asset only once. If an asset fits in more than one category, list the asset in the category where you think it fits best. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

### Part 1: Describe Each Residence, Building, Land, or Other Real Estate You Own or Have an Interest In

1. Do you own or have any legal or equitable interest in any residence, building, land, or similar property?

- ☐ No. Go to Part 2.  
☒ Yes. Where is the property?

1.1. 675 Walton Ave Apt 2B  
Street address, if available, or other description

Bronx NY 10451  
City State ZIP Code

New York  
County

What is the property? Check all that apply.

- ☐ Single-family home  
☐ Duplex or multi-unit building  
☒ Condominium or cooperative  
☐ Manufactured or mobile home  
☐ Land  
☐ Investment property  
☐ Timeshare  
☐ Other \_\_\_\_\_

Who has an interest in the property? Check one.

- ☒ Debtor 1 only  
☐ Debtor 2 only  
☐ Debtor 1 and Debtor 2 only  
☐ At least one of the debtors and another

Other information you wish to add about this item, such as local property identification number: \_\_\_\_\_

Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: Creditors Who Have Claims Secured by Property.

Current value of the entire property? \$ 500,000.00  
Current value of the portion you own? \$ 500,000.00

Describe the nature of your ownership interest (such as fee simple, tenancy by the entireties, or a life estate), if known.

tenancy by entireties

☐ Check if this is community property (see instructions)

If you own or have more than one, list here:

1.2. \_\_\_\_\_  
Street address, if available, or other description

\_\_\_\_\_  
City State ZIP Code

\_\_\_\_\_  
County

What is the property? Check all that apply.

- ☐ Single-family home  
☐ Duplex or multi-unit building  
☐ Condominium or cooperative  
☐ Manufactured or mobile home  
☐ Land  
☐ Investment property  
☐ Timeshare  
☐ Other \_\_\_\_\_

Who has an interest in the property? Check one.

- ☐ Debtor 1 only  
☐ Debtor 2 only  
☐ Debtor 1 and Debtor 2 only  
☐ At least one of the debtors and another

Other information you wish to add about this item, such as local property identification number: \_\_\_\_\_

Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: Creditors Who Have Claims Secured by Property.

Current value of the entire property? \_\_\_\_\_  
Current value of the portion you own? \_\_\_\_\_

Describe the nature of your ownership interest (such as fee simple, tenancy by the entireties, or a life estate), if known.

☐ Check if this is community property (see instructions)

Debtor 1 Cheryl Louise Williams-Murray  
First Name Middle Name Last Name

Case number (if known) 19-11705

1.3. Street address, if available, or other description  
  
  
City State ZIP Code  
  
County

**What is the property?** Check all that apply.

- ☐ Single-family home  
☐ Duplex or multi-unit building  
☐ Condominium or cooperative  
☐ Manufactured or mobile home  
☐ Land  
☐ Investment property  
☐ Timeshare  
☐ Other

Do not deduct secured claims or exemptions. Put the amount of any secured claims on *Schedule D: Creditors Who Have Claims Secured by Property*.

Current value of the entire property? \$  
Current value of the portion you own? \$

Describe the nature of your ownership interest (such as fee simple, tenancy by the entireties, or a life estate), if known.

**Who has an interest in the property?** Check one.

- ☐ Debtor 1 only  
☐ Debtor 2 only  
☐ Debtor 1 and Debtor 2 only  
☐ At least one of the debtors and another

☐ Check if this is community property (see instructions)

Other information you wish to add about this item, such as local property identification number:

2. Add the dollar value of the portion you own for all of your entries from Part 1, including any entries for pages you have attached for Part 1. Write that number here.

\$ 500,000.00

**Part 2: Describe Your Vehicles**

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on *Schedule G: Executory Contracts and Unexpired Leases*.

3. Cars, vans, trucks, tractors, sport utility vehicles, motorcycles

- ☒ No  
☐ Yes

3.1. Make:  
Model:  
Year:  
Approximate mileage:  
Other information:

**Who has an interest in the property?** Check one.

- ☐ Debtor 1 only  
☐ Debtor 2 only  
☐ Debtor 1 and Debtor 2 only  
☐ At least one of the debtors and another

Do not deduct secured claims or exemptions. Put the amount of any secured claims on *Schedule D: Creditors Who Have Claims Secured by Property*.

Current value of the entire property? \$  
Current value of the portion you own? \$

☐ Check if this is community property (see instructions)

If you own or have more than one, describe here:

3.2. Make:  
Model:  
Year:  
Approximate mileage:  
Other information:

**Who has an interest in the property?** Check one.

- ☐ Debtor 1 only  
☐ Debtor 2 only  
☐ Debtor 1 and Debtor 2 only  
☐ At least one of the debtors and another

Do not deduct secured claims or exemptions. Put the amount of any secured claims on *Schedule D: Creditors Who Have Claims Secured by Property*.

Current value of the entire property? \$  
Current value of the portion you own? \$

☐ Check if this is community property (see instructions)



Debtor 1 Cheryl Louise Williams-Murray  
First Name Middle Name Last Name

Case number (if known) 19-11705

3.3. Make: \_\_\_\_\_  
Model: \_\_\_\_\_  
Year: \_\_\_\_\_  
Approximate mileage: \_\_\_\_\_  
Other information:

Who has an interest in the property? Check one.

- ☐ Debtor 1 only  
☐ Debtor 2 only  
☐ Debtor 1 and Debtor 2 only  
☐ At least one of the debtors and another

☐ Check if this is community property (see instructions)

Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: Creditors Who Have Claims Secured by Property.

Current value of the entire property? Current value of the portion you own?

\$ \_\_\_\_\_ \$ \_\_\_\_\_

3.4. Make: \_\_\_\_\_  
Model: \_\_\_\_\_  
Year: \_\_\_\_\_  
Approximate mileage: \_\_\_\_\_  
Other information:

Who has an interest in the property? Check one.

- ☐ Debtor 1 only  
☐ Debtor 2 only  
☐ Debtor 1 and Debtor 2 only  
☐ At least one of the debtors and another

☐ Check if this is community property (see instructions)

Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: Creditors Who Have Claims Secured by Property.

Current value of the entire property? Current value of the portion you own?

\$ \_\_\_\_\_ \$ \_\_\_\_\_

4. Watercraft, aircraft, motor homes, ATVs and other recreational vehicles, other vehicles, and accessories

Examples: Boats, trailers, motors, personal watercraft, fishing vessels, snowmobiles, motorcycle accessories

- ☒ No  
☐ Yes

4.1. Make: \_\_\_\_\_  
Model: \_\_\_\_\_  
Year: \_\_\_\_\_  
Other information:

Who has an interest in the property? Check one.

- ☐ Debtor 1 only  
☐ Debtor 2 only  
☐ Debtor 1 and Debtor 2 only  
☐ At least one of the debtors and another

☐ Check if this is community property (see instructions)

Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: Creditors Who Have Claims Secured by Property.

Current value of the entire property? Current value of the portion you own?

\$ \_\_\_\_\_ \$ \_\_\_\_\_

If you own or have more than one, list here:

4.2. Make: \_\_\_\_\_  
Model: \_\_\_\_\_  
Year: \_\_\_\_\_  
Other information:

Who has an interest in the property? Check one.

- ☐ Debtor 1 only  
☐ Debtor 2 only  
☐ Debtor 1 and Debtor 2 only  
☐ At least one of the debtors and another

☐ Check if this is community property (see instructions)

Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: Creditors Who Have Claims Secured by Property.

Current value of the entire property? Current value of the portion you own?

\$ \_\_\_\_\_ \$ \_\_\_\_\_

5. Add the dollar value of the portion you own for all of your entries from Part 2, including any entries for pages you have attached for Part 2. Write that number here

\$ 0.00

Debtor 1

Cheryl Louise Williams-Murray  
First Name Middle Name Last Name

Case number (if known) 19-11705

**Part 4: Describe Your Financial Assets**

Do you own or have any legal or equitable interest in any of the following?

**Current value of the portion you own?**  
Do not deduct secured claims or exemptions.

**16. Cash**

Examples: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition

☐ No

☒ Yes ..... Cash: ..... \$ 8.00

**17. Deposits of money**

Examples: Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each.

☐ No

☒ Yes .....

Institution name:

|                                |            |             |
|--------------------------------|------------|-------------|
| 17.1. Checking account:        | Chase      | \$ 300.00   |
| 17.2. Checking account:        | Apple Bank | \$ 470.00   |
| 17.3. Savings account:         |            | \$          |
| 17.4. Savings account:         |            | \$          |
| 17.5. Certificates of deposit: | Apple Bank | \$ 1,000.00 |
| 17.6. Other financial account: |            | \$          |
| 17.7. Other financial account: |            | \$          |
| 17.8. Other financial account: |            | \$          |
| 17.9. Other financial account: |            | \$          |

**18. Bonds, mutual funds, or publicly traded stocks**

Examples: Bond funds, investment accounts with brokerage firms, money market accounts

☒ No

☐ Yes .....

Institution or issuer name:

|       |          |
|-------|----------|
| _____ | \$ _____ |
| _____ | \$ _____ |
| _____ | \$ _____ |

**19. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture**

☒ No

☐ Yes. Give specific information about them.....

Name of entity:

% of ownership:

|       |            |          |
|-------|------------|----------|
| _____ | 0% _____ % | \$ _____ |
| _____ | 0% _____ % | \$ _____ |
| _____ | 0% _____ % | \$ _____ |

Debtor 1

Cheryl Louise Williams-Murray  
First Name Middle Name Last Name

Case number (if known) 19-11705

**Part 3: Describe Your Personal and Household Items**

Do you own or have any legal or equitable interest in any of the following items?

Current value of the portion you own?

Do not deduct secured claims or exemptions.

**6. Household goods and furnishings**

Examples: Major appliances, furniture, linens, china, kitchenware

☐ No

☒ Yes. Describe..... refrigerator, non functional stove, washer, dryer & microwave

\$ 500.00

**7. Electronics**

Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music collections; electronic devices including cell phones, cameras, media players, games

☐ No

☒ Yes. Describe..... 32" tv, PC...

\$ 100.00

**8. Collectibles of value**

Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles

☐ No

☒ Yes. Describe..... piano, hand crafted bed & bookshelf

\$ 500.00

**9. Equipment for sports and hobbies**

Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments

☒ No

☐ Yes. Describe.....

\$

**10. Firearms**

Examples: Pistols, rifles, shotguns, ammunition, and related equipment

☒ No

☐ Yes. Describe.....

\$

**11. Clothes**

Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories

☐ No

☒ Yes. Describe..... everyday clothes

\$ 100.00

**12. Jewelry**

Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver

☐ No

☒ Yes. Describe..... Jewelry, costume jewelry

\$ 300.00

**13. Non-farm animals**

Examples: Dogs, cats, birds, horses

☒ No

☐ Yes. Describe.....

\$

**14. Any other personal and household items you did not already list, including any health aids you did not list**

☒ No

☐ Yes. Give specific information. ....

\$

**15. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached for Part 3. Write that number here**

\$ 1,500.00

Debtor 1 **Cheryl Louise Williams-Murray**  
First Name Middle Name Last Name

Case number (if known) **19-11705**

**20. Government and corporate bonds and other negotiable and non-negotiable instruments**

*Negotiable instruments* include personal checks, cashiers' checks, promissory notes, and money orders.  
*Non-negotiable instruments* are those you cannot transfer to someone by signing or delivering them.

☒ No

☐ Yes. Give specific  
information about  
them.....

Issuer name:

\_\_\_\_\_  
\$ \_\_\_\_\_  
\_\_\_\_\_  
\$ \_\_\_\_\_  
\_\_\_\_\_  
\$ \_\_\_\_\_

**21. Retirement or pension accounts**

*Examples:* Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans

☒ No

☐ Yes. List each  
account separately.

Type of account:

Institution name:

401(k) or similar plan: \_\_\_\_\_ \$ \_\_\_\_\_  
Pension plan: \_\_\_\_\_ \$ \_\_\_\_\_  
IRA: \_\_\_\_\_ \$ \_\_\_\_\_  
Retirement account: \_\_\_\_\_ \$ \_\_\_\_\_  
Keogh: \_\_\_\_\_ \$ \_\_\_\_\_  
Additional account: \_\_\_\_\_ \$ \_\_\_\_\_  
Additional account: \_\_\_\_\_ \$ \_\_\_\_\_

**22. Security deposits and prepayments**

Your share of all unused deposits you have made so that you may continue service or use from a company  
*Examples:* Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or others

☒ No

☐ Yes .....

Institution name or individual:

Electric: \_\_\_\_\_ \$ \_\_\_\_\_  
Gas: \_\_\_\_\_ \$ \_\_\_\_\_  
Heating oil: \_\_\_\_\_ \$ \_\_\_\_\_  
Security deposit on rental unit: \_\_\_\_\_ \$ \_\_\_\_\_  
Prepaid rent: \_\_\_\_\_ \$ \_\_\_\_\_  
Telephone: \_\_\_\_\_ \$ \_\_\_\_\_  
Water: \_\_\_\_\_ \$ \_\_\_\_\_  
Rented furniture: \_\_\_\_\_ \$ \_\_\_\_\_  
Other: \_\_\_\_\_ \$ \_\_\_\_\_

**23. Annuities (A contract for a periodic payment of money to you, either for life or for a number of years)**

☒ No

☐ Yes .....

Issuer name and description:

\_\_\_\_\_  
\$ \_\_\_\_\_  
\_\_\_\_\_  
\$ \_\_\_\_\_  
\_\_\_\_\_  
\$ \_\_\_\_\_



Debtor 1 Cheryl Louise Williams-Murray Case number (if known) 19-11705  
First Name Middle Name Last Name

**24. Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program.**

26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1).

☒ No

☐ Yes ..... Institution name and description. Separately file the records of any interests. 11 U.S.C. § 521(c):

\_\_\_\_\_  
\$ \_\_\_\_\_  
\_\_\_\_\_  
\$ \_\_\_\_\_  
\_\_\_\_\_  
\$ \_\_\_\_\_

**25. Trusts, equitable or future interests in property (other than anything listed in line 1), and rights or powers exercisable for your benefit**

☒ No

☐ Yes. Give specific information about them....

\_\_\_\_\_  
\$ \_\_\_\_\_

**26. Patents, copyrights, trademarks, trade secrets, and other intellectual property**

Examples: Internet domain names, websites, proceeds from royalties and licensing agreements

☒ No

☐ Yes. Give specific information about them....

\_\_\_\_\_  
\$ \_\_\_\_\_

**27. Licenses, franchises, and other general intangibles**

Examples: Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses

☒ No

☐ Yes. Give specific information about them....

\_\_\_\_\_  
\$ \_\_\_\_\_

**Money or property owed to you?**

**Current value of the portion you own?**  
Do not deduct secured claims or exemptions.

**28. Tax refunds owed to you**

☒ No

☐ Yes. Give specific information about them, including whether you already filed the returns and the tax years. ....

\_\_\_\_\_

Federal: \$ \_\_\_\_\_  
State: \$ \_\_\_\_\_  
Local: \$ \_\_\_\_\_

**29. Family support**

Examples: Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property settlement

☒ No

☐ Yes. Give specific information.....

\_\_\_\_\_

Alimony: \$ \_\_\_\_\_  
Maintenance: \$ \_\_\_\_\_  
Support: \$ \_\_\_\_\_  
Divorce settlement: \$ \_\_\_\_\_  
Property settlement: \$ \_\_\_\_\_

**30. Other amounts someone owes you**

Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Security benefits; unpaid loans you made to someone else

☒ No

☐ Yes. Give specific information.....

\_\_\_\_\_  
\$ \_\_\_\_\_

Debtor 1 Cheryl Louise Williams-Murray Case number (if known) 19-11705  
First Name Middle Name Last Name

**31. Interests in insurance policies**

Examples: Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance

- ☒ No
- ☐ Yes. Name the insurance company of each policy and list its value. ... Company name: Beneficiary: Surrender or refund value:
- |  |  |    |
|--|--|----|
|  |  | \$ |
|  |  | \$ |
|  |  | \$ |

**32. Any interest in property that is due you from someone who has died**

If you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitled to receive property because someone has died.

- ☒ No
- ☐ Yes. Give specific information. .... \$

**33. Claims against third parties, whether or not you have filed a lawsuit or made a demand for payment**

Examples: Accidents, employment disputes, insurance claims, or rights to sue

- ☒ No
- ☐ Yes. Describe each claim. .... \$

**34. Other contingent and unliquidated claims of every nature, including counterclaims of the debtor and rights to set off claims**

- ☒ No
- ☐ Yes. Describe each claim. .... \$

**35. Any financial assets you did not already list**

- ☒ No
- ☐ Yes. Give specific information. .... \$

**36. Add the dollar value of all of your entries from Part 4, including any entries for pages you have attached for Part 4. Write that number here**

\$ 1,778.00

**Part 5: Describe Any Business-Related Property You Own or Have an Interest In. List any real estate in Part 1.**

**37. Do you own or have any legal or equitable interest in any business-related property?**

- ☒ No. Go to Part 6.
- ☐ Yes. Go to line 38.

**Current value of the portion you own?**  
Do not deduct secured claims or exemptions.

**38. Accounts receivable or commissions you already earned**

- ☒ No
- ☐ Yes. Describe. .... \$

**39. Office equipment, furnishings, and supplies**

Examples: Business-related computers, software, modems, printers, copiers, fax machines, rugs, telephones, desks, chairs, electronic devices

- ☒ No
- ☐ Yes. Describe. .... \$

Debtor 1 Cheryl Louise Williams-Murray  
First Name Middle Name Last Name

Case number (if known) 19-11705

40. Machinery, fixtures, equipment, supplies you use in business, and tools of your trade

☒ No

☐ Yes. Describe.....

\$

41. Inventory

☒ No

☐ Yes. Describe.....

\$

42. Interests in partnerships or joint ventures

☒ No

☐ Yes. Describe..... Name of entity:

% of ownership:

%

\$

%

\$

%

\$

43. Customer lists, mailing lists, or other compilations

☒ No

☐ Yes. Do your lists include personally identifiable information (as defined in 11 U.S.C. § 101(41A))?

☐ No

☐ Yes. Describe.....

\$

44. Any business-related property you did not already list

☒ No

☐ Yes. Give specific information .....

\$

\$

\$

\$

\$

\$

45. Add the dollar value of all of your entries from Part 5, including any entries for pages you have attached for Part 5. Write that number here .....

\$

0.00

**Part 6: Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interest In.**  
If you own or have an interest in farmland, list it in Part 1.

46. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property?

☒ No. Go to Part 7.

☐ Yes. Go to line 47.

Current value of the portion you own?

Do not deduct secured claims or exemptions.

47. Farm animals

Examples: Livestock, poultry, farm-raised fish

☒ No

☐ Yes.....

\$

0.00

Debtor 1 Cheryl Louise Williams-Murray  
First Name Middle Name Last Name

Case number (if known) 19-11705

48. Crops—either growing or harvested

☒ No

☐ Yes. Give specific information.....

\$

49. Farm and fishing equipment, implements, machinery, fixtures, and tools of trade

☒ No

☐ Yes.....

\$

50. Farm and fishing supplies, chemicals, and feed

☒ No

☐ Yes.....

\$

51. Any farm- and commercial fishing-related property you did not already list

☒ No

☐ Yes. Give specific information.....

\$

52. Add the dollar value of all of your entries from Part 6, including any entries for pages you have attached for Part 6. Write that number here

\$ 0.00

**Part 7: Describe All Property You Own or Have an Interest in That You Did Not List Above**

53. Do you have other property of any kind you did not already list?

Examples: Season tickets, country club membership

☒ No

☐ Yes. Give specific information.....

\$  
\$  
\$

54. Add the dollar value of all of your entries from Part 7. Write that number here

\$ 0.00

**Part 8: List the Totals of Each Part of this Form**

55. Part 1: Total real estate, line 2

\$ 500,000.00

56. Part 2: Total vehicles, line 5

\$ 0.00

57. Part 3: Total personal and household items, line 15

\$ 1,500.00

58. Part 4: Total financial assets, line 36

\$ 1,778.00

59. Part 5: Total business-related property, line 45

\$ 0.00

60. Part 6: Total farm- and fishing-related property, line 52

\$ 0.00

61. Part 7: Total other property not listed, line 54

+\$ 0.00

62. Total personal property. Add lines 56 through 61.

\$ 3,278.00

Copy personal property total → +\$ 3,278.00

63. Total of all property on Schedule A/B. Add line 55 + line 62.

\$ 503,278.00



Fill in this information to identify your case:

Debtor 1 Cheryl Louise Williams-Murray  
First Name Middle Name Last Name  
Debtor 2  
(Spouse, if filing) First Name Middle Name Last Name  
United States Bankruptcy Court for the: Southern District of New York  
Case number 19-11705  
(If known)

☐ Check if this is an amended filing

Official Form 106D

**Schedule D: Creditors Who Have Claims Secured by Property**

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case number (if known).

1. Do any creditors have claims secured by your property?

- ☐ No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form.  
☒ Yes. Fill in all of the information below.

**Part 1: List All Secured Claims**

2. List all secured claims. If a creditor has more than one secured claim, list the creditor separately for each claim. If more than one creditor has a particular claim, list the other creditors in Part 2. As much as possible, list the claims in alphabetical order according to the creditor's name.

| Column A<br>Amount of claim<br>Do not deduct the<br>value of collateral. | Column B<br>Value of collateral<br>that supports this<br>claim | Column C<br>Unsecured<br>portion<br>if any |
|--|--|--|
|--|--|--|

|     |  |   |              |               |               |
|-----|--|---|--------------|---------------|---------------|
| 2.1 | 675 Walton Ave Inc.<br>Creditor's Name<br>551 Fifth Ave, Suite 500<br>Number Street<br>Greenthal Property Mgmt<br>New York NY 10176<br>City State ZIP Code | Describe the property that secures the claim:<br>Apartment 2B - 3 Br 2 bath 1500sq ft | \$ 76,440.00 | \$ 500,000.00 | \$ 423,560.00 |
|-----|--|---|--------------|---------------|---------------|

As of the date you file, the claim is: Check all that apply.

- ☒ Contingent  
☒ Unliquidated  
☒ Disputed

Nature of lien. Check all that apply.

- ☐ An agreement you made (such as mortgage or secured car loan)  
☐ Statutory lien (such as tax lien, mechanic's lien)  
☐ Judgment lien from a lawsuit  
☒ Other (including a right to offset) Pending case

Who owes the debt? Check one.

- ☐ Debtor 1 only  
☐ Debtor 2 only  
☐ Debtor 1 and Debtor 2 only  
☐ At least one of the debtors and another  
☐ Check if this claim relates to a community debt

Date debt was incurred

Last 4 digits of account number

|     |   |   |           |             |             |
|-----|---|---|-----------|-------------|-------------|
| 2.2 | Apple Bank<br>Creditor's Name<br>44 East 161st Street<br>Number Street<br>Bronx NY 10451<br>City State ZIP Code | Describe the property that secures the claim:<br>secured loan; Certificate of Deposit | \$ 278.63 | \$ 1,360.97 | \$ 1,082.34 |
|-----|---|---|-----------|-------------|-------------|

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent  
☒ Unliquidated  
☐ Disputed

Nature of lien. Check all that apply.

- ☒ An agreement you made (such as mortgage or secured car loan)  
☐ Statutory lien (such as tax lien, mechanic's lien)  
☐ Judgment lien from a lawsuit  
☐ Other (including a right to offset)

Who owes the debt? Check one.

- ☒ Debtor 1 only  
☐ Debtor 2 only  
☐ Debtor 1 and Debtor 2 only  
☐ At least one of the debtors and another  
☐ Check if this claim relates to a community debt

Date debt was incurred

Last 4 digits of account number 4849

Add the dollar value of your entries in Column A on this page. Write that number here: \$ 76,718.63

Debtor 1

Cheryl Louise Williams-Murray

First Name Middle Name Last Name

Case number (if known) 19-11705

**Part 1:**

**Additional Page**

After listing any entries on this page, number them beginning with 2.3, followed by 2.4, and so forth.

Column A

Amount of claim  
Do not deduct the  
value of collateral.

Column B

Value of collateral  
that supports this  
claim

Column C

Unsecured  
portion  
If any

Creditor's Name

Number Street

City State ZIP Code

Describe the property that secures the claim:

\$ \$ \$

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

Nature of lien. Check all that apply.

- ☐ An agreement you made (such as mortgage or secured car loan)  
☐ Statutory lien (such as tax lien, mechanic's lien)  
☐ Judgment lien from a lawsuit  
☐ Other (including a right to offset) \_\_\_\_\_

Who owes the debt? Check one.

- ☐ Debtor 1 only  
☐ Debtor 2 only  
☐ Debtor 1 and Debtor 2 only  
☐ At least one of the debtors and another  
☐ Check if this claim relates to a community debt

Date debt was incurred \_\_\_\_\_

Last 4 digits of account number \_\_\_\_\_

Creditor's Name

Number Street

City State ZIP Code

Describe the property that secures the claim:

\$ \$ \$

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

Nature of lien. Check all that apply.

- ☐ An agreement you made (such as mortgage or secured car loan)  
☐ Statutory lien (such as tax lien, mechanic's lien)  
☐ Judgment lien from a lawsuit  
☐ Other (including a right to offset) \_\_\_\_\_

Who owes the debt? Check one.

- ☐ Debtor 1 only  
☐ Debtor 2 only  
☐ Debtor 1 and Debtor 2 only  
☐ At least one of the debtors and another  
☐ Check if this claim relates to a community debt

Date debt was incurred \_\_\_\_\_

Last 4 digits of account number \_\_\_\_\_

Creditor's Name

Number Street

City State ZIP Code

Describe the property that secures the claim:

\$ \$ \$

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

Nature of lien. Check all that apply.

- ☐ An agreement you made (such as mortgage or secured car loan)  
☐ Statutory lien (such as tax lien, mechanic's lien)  
☐ Judgment lien from a lawsuit  
☐ Other (including a right to offset) \_\_\_\_\_

Who owes the debt? Check one.

- ☐ Debtor 1 only  
☐ Debtor 2 only  
☐ Debtor 1 and Debtor 2 only  
☐ At least one of the debtors and another  
☐ Check if this claim relates to a community debt

Date debt was incurred \_\_\_\_\_

Last 4 digits of account number \_\_\_\_\_

Add the dollar value of your entries in Column A on this page. Write that number here:

If this is the last page of your form, add the dollar value totals from all pages.

Write that number here:

|    |  |
|----|--|
| \$ |  |
| \$ |  |

Debtor 1

Cheryl Louise Williams-Murray

First Name Middle Name Last Name

Case number (if known) 19-11705

**Part 2: List Others to Be Notified for a Debt That You Already Listed**

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

|  |  |
|--|--|
| <input type="checkbox"/><br>Name _____<br>Number _____ Street _____<br>City _____ State _____ ZIP Code _____ | On which line in Part 1 did you enter the creditor? _____<br>Last 4 digits of account number _____ |
| <input type="checkbox"/><br>Name _____<br>Number _____ Street _____<br>City _____ State _____ ZIP Code _____ | On which line in Part 1 did you enter the creditor? _____<br>Last 4 digits of account number _____ |
| <input type="checkbox"/><br>Name _____<br>Number _____ Street _____<br>City _____ State _____ ZIP Code _____ | On which line in Part 1 did you enter the creditor? _____<br>Last 4 digits of account number _____ |
| <input type="checkbox"/><br>Name _____<br>Number _____ Street _____<br>City _____ State _____ ZIP Code _____ | On which line in Part 1 did you enter the creditor? _____<br>Last 4 digits of account number _____ |
| <input type="checkbox"/><br>Name _____<br>Number _____ Street _____<br>City _____ State _____ ZIP Code _____ | On which line in Part 1 did you enter the creditor? _____<br>Last 4 digits of account number _____ |
| <input type="checkbox"/><br>Name _____<br>Number _____ Street _____<br>City _____ State _____ ZIP Code _____ | On which line in Part 1 did you enter the creditor? _____<br>Last 4 digits of account number _____ |

Fill in this information to identify your case:

Debtor 1 Cheryl Louise Williams-Murray  
First Name Middle Name Last Name  
Debtor 2  
(Spouse, if filing) First Name Middle Name Last Name  
United States Bankruptcy Court for the: Southern District of New York  
Case number 19-11705  
(if known)

☐ Check if this is an amended filing

Official Form 106E/F

**Schedule E/F: Creditors Who Have Unsecured Claims**

12/15

Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on *Schedule A/B: Property* (Official Form 106A/B) and on *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 106G). Do not include any creditors with partially secured claims that are listed in *Schedule D: Creditors Who Have Claims Secured by Property*. If more space is needed, copy the Part you need, fill it out, number the entries in the boxes on the left. Attach the Continuation Page to this page. On the top of any additional pages, write your name and case number (if known).

**Part 1: List All of Your PRIORITY Unsecured Claims**

1. Do any creditors have priority unsecured claims against you?

- ☐ No. Go to Part 2.  
☒ Yes.

2. List all of your priority unsecured claims. If a creditor has more than one priority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. If a claim has both priority and nonpriority amounts, list that claim here and show both priority and nonpriority amounts. As much as possible, list the claims in alphabetical order according to the creditor's name. If you have more than two priority unsecured claims, fill out the Continuation Page of Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. (For an explanation of each type of claim, see the instructions for this form in the instruction booklet.)

|   | Total claim | Priority amount | Nonpriority amount |
|---|-------------|-----------------|--------------------|
| 2.1 <u>675 Walton Ave Inc</u><br><u>551 5th Ave Suite 500</u><br><u>Greenthal Property Mgmt</u><br><u>New York NY 10176</u><br>Priority Creditor's Name<br>Number Street<br>City State ZIP Code<br>Last 4 digits of account number _____ \$ <u>76440</u> \$ <u>500,000</u> \$ <u>423,560</u><br>When was the debt incurred? _____<br>As of the date you file, the claim is: Check all that apply.<br><input checked="" type="checkbox"/> Contingent<br><input checked="" type="checkbox"/> Unliquidated<br><input checked="" type="checkbox"/> Disputed<br>Who incurred the debt? Check one.<br><input checked="" type="checkbox"/> Debtor 1 only<br><input type="checkbox"/> Debtor 2 only<br><input type="checkbox"/> Debtor 1 and Debtor 2 only<br><input type="checkbox"/> At least one of the debtors and another<br><input type="checkbox"/> Check if this claim is for a community debt<br>Is the claim subject to offset?<br><input type="checkbox"/> No<br><input checked="" type="checkbox"/> Yes<br>Type of PRIORITY unsecured claim:<br><input type="checkbox"/> Domestic support obligations<br><input type="checkbox"/> Taxes and certain other debts you owe the government<br><input type="checkbox"/> Claims for death or personal injury while you were intoxicated<br><input checked="" type="checkbox"/> Other. Specify <u>pending case</u> |             |                 |                    |

|     |   |
|-----|---|
| 2.2 | Priority Creditor's Name<br>Number Street<br>City State ZIP Code<br>Who incurred the debt? Check one.<br><input type="checkbox"/> Debtor 1 only<br><input type="checkbox"/> Debtor 2 only<br><input type="checkbox"/> Debtor 1 and Debtor 2 only<br><input type="checkbox"/> At least one of the debtors and another<br><input type="checkbox"/> Check if this claim is for a community debt<br>Is the claim subject to offset?<br><input checked="" type="checkbox"/> No<br><input type="checkbox"/> Yes<br>Last 4 digits of account number _____ \$ _____ \$ _____<br>When was the debt incurred? _____<br>As of the date you file, the claim is: Check all that apply.<br><input type="checkbox"/> Contingent<br><input type="checkbox"/> Unliquidated<br><input type="checkbox"/> Disputed<br>Type of PRIORITY unsecured claim:<br><input type="checkbox"/> Domestic support obligations<br><input type="checkbox"/> Taxes and certain other debts you owe the government<br><input type="checkbox"/> Claims for death or personal injury while you were intoxicated<br><input type="checkbox"/> Other. Specify _____ |
|-----|---|



Debtor 1 Cheryl Louise Williams-Murray  
First Name Middle Name Last Name

Case number (if known) 19-11705

**Part 1: Your PRIORITY Unsecured Claims – Continuation Page**

After listing any entries on this page, number them beginning with 2.3, followed by 2.4, and so forth.

Total claim Priority amount Nonpriority amount

|  |   |  |
|--|---|--|
| <input type="checkbox"/><br>Priority Creditor's Name _____<br>Number _____ Street _____<br>City _____ State _____ ZIP Code _____<br>Who incurred the debt? Check one.<br><input type="checkbox"/> Debtor 1 only<br><input type="checkbox"/> Debtor 2 only<br><input type="checkbox"/> Debtor 1 and Debtor 2 only<br><input type="checkbox"/> At least one of the debtors and another<br><input type="checkbox"/> Check if this claim is for a community debt<br>Is the claim subject to offset?<br><input type="checkbox"/> No<br><input type="checkbox"/> Yes | Last 4 digits of account number _____ \$ _____ \$ _____ \$ _____<br>When was the debt incurred? _____<br>As of the date you file, the claim is: Check all that apply.<br><input type="checkbox"/> Contingent<br><input type="checkbox"/> Unliquidated<br><input type="checkbox"/> Disputed<br>Type of PRIORITY unsecured claim:<br><input type="checkbox"/> Domestic support obligations<br><input type="checkbox"/> Taxes and certain other debts you owe the government<br><input type="checkbox"/> Claims for death or personal injury while you were intoxicated<br><input type="checkbox"/> Other. Specify _____ | Total claim<br>Priority amount<br>Nonpriority amount |
|--|---|--|

|  |   |  |
|--|---|--|
| <input type="checkbox"/><br>Priority Creditor's Name _____<br>Number _____ Street _____<br>City _____ State _____ ZIP Code _____<br>Who incurred the debt? Check one.<br><input type="checkbox"/> Debtor 1 only<br><input type="checkbox"/> Debtor 2 only<br><input type="checkbox"/> Debtor 1 and Debtor 2 only<br><input type="checkbox"/> At least one of the debtors and another<br><input type="checkbox"/> Check if this claim is for a community debt<br>Is the claim subject to offset?<br><input type="checkbox"/> No<br><input type="checkbox"/> Yes | Last 4 digits of account number _____ \$ _____ \$ _____ \$ _____<br>When was the debt incurred? _____<br>As of the date you file, the claim is: Check all that apply.<br><input type="checkbox"/> Contingent<br><input type="checkbox"/> Unliquidated<br><input type="checkbox"/> Disputed<br>Type of PRIORITY unsecured claim:<br><input type="checkbox"/> Domestic support obligations<br><input type="checkbox"/> Taxes and certain other debts you owe the government<br><input type="checkbox"/> Claims for death or personal injury while you were intoxicated<br><input type="checkbox"/> Other. Specify _____ | Total claim<br>Priority amount<br>Nonpriority amount |
|--|---|--|

|  |   |  |
|--|---|--|
| <input type="checkbox"/><br>Priority Creditor's Name _____<br>Number _____ Street _____<br>City _____ State _____ ZIP Code _____<br>Who incurred the debt? Check one.<br><input type="checkbox"/> Debtor 1 only<br><input type="checkbox"/> Debtor 2 only<br><input type="checkbox"/> Debtor 1 and Debtor 2 only<br><input type="checkbox"/> At least one of the debtors and another<br><input type="checkbox"/> Check if this claim is for a community debt<br>Is the claim subject to offset?<br><input type="checkbox"/> No<br><input type="checkbox"/> Yes | Last 4 digits of account number _____ \$ _____ \$ _____ \$ _____<br>When was the debt incurred? _____<br>As of the date you file, the claim is: Check all that apply.<br><input type="checkbox"/> Contingent<br><input type="checkbox"/> Unliquidated<br><input type="checkbox"/> Disputed<br>Type of PRIORITY unsecured claim:<br><input type="checkbox"/> Domestic support obligations<br><input type="checkbox"/> Taxes and certain other debts you owe the government<br><input type="checkbox"/> Claims for death or personal injury while you were intoxicated<br><input type="checkbox"/> Other. Specify _____ | Total claim<br>Priority amount<br>Nonpriority amount |
|--|---|--|

Debtor 1 Cheryl Louise Williams-Murray  
First Name Middle Name Last Name

Case number (if known) 19-11705

**Part 2: List All of Your NONPRIORITY Unsecured Claims**

**3. Do any creditors have nonpriority unsecured claims against you?**

- ☐ No. You have nothing to report in this part. Submit this form to the court with your other schedules.  
☒ Yes

**4. List all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim.** If a creditor has more than one nonpriority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims already included in Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. If you have more than three nonpriority unsecured claims fill out the Continuation Page of Part 2.

4.1 US Dept of Education offset  
Nonpriority Creditor's Name  
PO Box 5609  
Number Street  
Greenville TX 75430  
City State ZIP Code

Last 4 digits of account number 7930

When was the debt incurred? 7/1984

Total claim

\$ 1432.74

**Who incurred the debt? Check one.**

- ☒ Debtor 1 only  
☐ Debtor 2 only  
☐ Debtor 1 and Debtor 2 only  
☐ At least one of the debtors and another

☐ Check if this claim is for a community debt

**Is the claim subject to offset?**

- ☒ No  
☐ Yes

**As of the date you file, the claim is: Check all that apply.**

- ☐ Contingent  
☒ Unliquidated  
☐ Disputed

**Type of NONPRIORITY unsecured claim:**

- ☒ Student loans  
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
☐ Debts to pension or profit-sharing plans/ and other similar debts  
☐ Other. Specify \_\_\_\_\_

4.2 Con Edison - JAF station  
Nonpriority Creditor's Name  
PO Box 1702  
Number Street  
New York NY 10116  
City State ZIP Code

Last 4 digits of account number 0056

When was the debt incurred? 5/2019

\$ 1530.57

**Who incurred the debt? Check one.**

- ☒ Debtor 1 only  
☐ Debtor 2 only  
☐ Debtor 1 and Debtor 2 only  
☐ At least one of the debtors and another

☐ Check if this claim is for a community debt

**Is the claim subject to offset?**

- ☒ No  
☐ Yes

**As of the date you file, the claim is: Check all that apply.**

- ☐ Contingent  
☒ Unliquidated  
☐ Disputed

**Type of NONPRIORITY unsecured claim:**

- ☐ Student loans  
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
☐ Debts to pension or profit-sharing plans, and other similar debts  
☒ Other. Specify past due utility

4.3 BioReference Laboratories  
Nonpriority Creditor's Name  
PO Box 2134  
Number Street  
New York NY 10087  
City State ZIP Code

Last 4 digits of account number 1709

When was the debt incurred? 8/2017

\$ 894.64

**Who incurred the debt? Check one.**

- ☒ Debtor 1 only  
☐ Debtor 2 only  
☐ Debtor 1 and Debtor 2 only  
☐ At least one of the debtors and another

☐ Check if this claim is for a community debt

**Is the claim subject to offset?**

- ☒ No  
☐ Yes

**As of the date you file, the claim is: Check all that apply.**

- ☐ Contingent  
☒ Unliquidated  
☐ Disputed

**Type of NONPRIORITY unsecured claim:**

- ☐ Student loans  
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
☐ Debts to pension or profit-sharing plans, and other similar debts  
☒ Other. Specify health care

Debtor 1 Cheryl Louise Williams-Murray  
First Name Middle Name Last Name

Case number (if known) 19-11705

**Part 2: Your NONPRIORITY Unsecured Claims – Continuation Page**

After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth.

Total claim

4.4 Professional Claims Bureau  
Nonpriority Creditor's Name  
PO Box 9060  
Number Street  
Hicksville NY 11802  
City State ZIP Code

Last 4 digits of account number 7384

\$ 23.05

When was the debt incurred? 3/2018

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent  
☒ Unliquidated  
☐ Disputed

Type of NONPRIORITY unsecured claim:

- ☐ Student loans  
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
☐ Debts to pension or profit-sharing plans, and other similar debts  
☒ Other. Specify health care

Who incurred the debt? Check one.

- ☒ Debtor 1 only  
☐ Debtor 2 only  
☐ Debtor 1 and Debtor 2 only  
☐ At least one of the debtors and another

☐ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No  
☐ Yes

4.5 Lenox Hill Hospital  
Nonpriority Creditor's Name  
680 5900  
Number Street  
New York NY 10087  
City State ZIP Code

Last 4 digits of account number 0910

\$ 65.00

When was the debt incurred? 3/2018

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent  
☒ Unliquidated  
☐ Disputed

Type of NONPRIORITY unsecured claim:

- ☐ Student loans  
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
☐ Debts to pension or profit-sharing plans, and other similar debts  
☒ Other. Specify health care

Who incurred the debt? Check one.

- ☒ Debtor 1 only  
☐ Debtor 2 only  
☐ Debtor 1 and Debtor 2 only  
☐ At least one of the debtors and another

☐ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No  
☐ Yes

4.6 JP Morgan Chase  
Nonpriority Creditor's Name  
PO Box 15369  
Number Street  
Wilmington DE 19880  
City State ZIP Code

Last 4 digits of account number 0112

\$ 184.97

When was the debt incurred? 6/2019

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent  
☒ Unliquidated  
☐ Disputed

Type of NONPRIORITY unsecured claim:

- ☐ Student loans  
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
☐ Debts to pension or profit-sharing plans, and other similar debts  
☒ Other. Specify credit card

Who incurred the debt? Check one.

- ☒ Debtor 1 only  
☐ Debtor 2 only  
☐ Debtor 1 and Debtor 2 only  
☐ At least one of the debtors and another

☐ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No  
☐ Yes

Debtor 1 Cheryl Louise Williams-Murray  
First Name Middle Name Last Name

Case number (if known) 19-11705

**Part 3: List Others to Be Notified About a Debt That You Already Listed**

5. Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

Arstrat, LLC

Name

PO Box 33720

Number

Street

Detroit

City

MI

State

48232

ZIP Code

ERC

Name

PO Box 23870

Number

Street

Jacksonville

City

FL

State

32241

ZIP Code

On which entry in Part 1 or Part 2 did you list the original creditor?

Line 4.5 of

(Check one):

☐ Part 1: Creditors with Priority Unsecured Claims

☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number 0910

On which entry in Part 1 or Part 2 did you list the original creditor?

Line 4.8 of

(Check one):

☐ Part 1: Creditors with Priority Unsecured Claims

☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number 3774

On which entry in Part 1 or Part 2 did you list the original creditor?

Line \_\_\_\_ of

(Check one):

☐ Part 1: Creditors with Priority Unsecured Claims

☐ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number \_\_\_\_

On which entry in Part 1 or Part 2 did you list the original creditor?

Line \_\_\_\_ of

(Check one):

☐ Part 1: Creditors with Priority Unsecured Claims

☐ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number \_\_\_\_

On which entry in Part 1 or Part 2 did you list the original creditor?

Line \_\_\_\_ of

(Check one):

☐ Part 1: Creditors with Priority Unsecured Claims

☐ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number \_\_\_\_

On which entry in Part 1 or Part 2 did you list the original creditor?

Line \_\_\_\_ of

(Check one):

☐ Part 1: Creditors with Priority Unsecured Claims

☐ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number \_\_\_\_

On which entry in Part 1 or Part 2 did you list the original creditor?

Line \_\_\_\_ of

(Check one):

☐ Part 1: Creditors with Priority Unsecured Claims

☐ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number \_\_\_\_



Debtor 1

Cheryl Louise Williams-Murray  
First Name Middle Name Last Name

Case number (if known) 19-11705

**Part 4: Add the Amounts for Each Type of Unsecured Claim**

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. § 159. Add the amounts for each type of unsecured claim.

Total claims  
from Part 1

6a. Domestic support obligations

6a. \$ 0

6b. Taxes and certain other debts you owe the government

6b. \$ 0

6c. Claims for death or personal injury while you were intoxicated

6c. \$ 0

6d. Other. Add all other priority unsecured claims. Write that amount here.

6d. + \$ 0

6e. Total. Add lines 6a through 6d.

6e. \$ 0

Total claim

Total claims  
from Part 2

6f. Student loans

6f. \$ 1432.74

6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims

6g. \$ 0

6h. Debts to pension or profit-sharing plans, and other similar debts

6h. \$ 0

6i. Other. Add all other nonpriority unsecured claims. Write that amount here.

6i. + \$ 4,685.21

6j. Total. Add lines 6f through 6i.

6j. \$ 6117.95

Debtor 1

Cheryl Louise Williams-Murray

First Name

Middle Name

Last Name

Case number (if known) 19-11705

**Part 2: Your NONPRIORITY Unsecured Claims – Continuation Page**

After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth.

Total claim

4.7

Northwell Health - NSLH Medical PC

Nonpriority Creditor's Name

PO Box 28372

Number

Street

New York

City

NY

State

10087

ZIP Code

Last 4 digits of account number 2183

When was the debt incurred? 3/2018

\$56.98

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent  
☒ Unliquidated  
☐ Disputed

Type of NONPRIORITY unsecured claim:

- ☐ Student loans  
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
☐ Debts to pension or profit-sharing plans, and other similar debts  
☒ Other. Specify health care

Who incurred the debt? Check one.

- ☒ Debtor 1 only  
☐ Debtor 2 only  
☐ Debtor 1 and Debtor 2 only  
☐ At least one of the debtors and another

☐ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No  
☐ Yes

4.8

TD Bank USA/Target credit card

Nonpriority Creditor's Name

PO Box 673

Number

Street

Minneapolis

City

MN

State

5540

ZIP Code

Last 4 digits of account number 3774

When was the debt incurred? 8/2016

\$300

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent  
☐ Unliquidated  
☒ Disputed

Type of NONPRIORITY unsecured claim:

- ☐ Student loans  
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
☐ Debts to pension or profit-sharing plans, and other similar debts  
☒ Other. Specify credit card consumer

Who incurred the debt? Check one.

- ☒ Debtor 1 only  
☐ Debtor 2 only  
☐ Debtor 1 and Debtor 2 only  
☐ At least one of the debtors and another

☐ Check if this claim is for a community debt

Is the claim subject to offset?

- ☐ No  
☒ Yes

4.9

Nonpriority Creditor's Name

Number

Street

City

State

ZIP Code

Last 4 digits of account number

When was the debt incurred?

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

Type of NONPRIORITY unsecured claim:

- ☐ Student loans  
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
☐ Debts to pension or profit-sharing plans, and other similar debts  
☐ Other. Specify

Who incurred the debt? Check one.

- ☐ Debtor 1 only  
☐ Debtor 2 only  
☐ Debtor 1 and Debtor 2 only  
☐ At least one of the debtors and another

☐ Check if this claim is for a community debt

Is the claim subject to offset?

- ☐ No  
☐ Yes

Fill in this information to identify your case:

Debtor Cheryl Louise Williams-Murray  
First Name Middle Name Last Name  
Debtor 2  
(Spouse If filing) \_\_\_\_\_  
First Name Middle Name Last Name  
United States Bankruptcy Court for the: Southern District of New York  
Case number 19-11705  
(If known)

☐ Check if this is an amended filing

Official Form 106G

**Schedule G: Executory Contracts and Unexpired Leases**

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

1. Do you have any executory contracts or unexpired leases?  
☒ No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.  
☐ Yes. Fill in all of the information below even if the contracts or leases are listed on *Schedule A/B: Property* (Official Form 106A/B).
2. List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

|     | Person or company with whom you have the contract or lease  | State what the contract or lease is for |
|-----|---|---|
| 2.1 | <u>675 Walton Ave Inc</u><br>Name<br>Number <u>Bronx</u> Street <u>NY</u> <u>10451</u><br>City State ZIP Code | Cooperative Proprietary lease           |
| 2.2 | Name _____<br>Number _____ Street _____<br>City _____ State _____ ZIP Code _____                              |   |
| 2.3 | Name _____<br>Number _____ Street _____<br>City _____ State _____ ZIP Code _____                              |   |
| 2.4 | Name _____<br>Number _____ Street _____<br>City _____ State _____ ZIP Code _____                              |   |
| 2.5 | Name _____<br>Number _____ Street _____<br>City _____ State _____ ZIP Code _____                              |   |

Debtor 1 Cheryl Louise Williams-Murray  
First Name Middle Name Last Name

Case number (if known) 19-11705

**Additional Page if You Have More Contracts or Leases**

Person or company with whom you have the contract or lease

What the contract or lease is for

2.2

Name  
Number Street  
City State ZIP Code

2.

Name  
Number Street  
City State ZIP Code

2.

Name  
Number Street  
City State ZIP Code

2.

Name  
Number Street  
City State ZIP Code

2.

Name  
Number Street  
City State ZIP Code

2.

Name  
Number Street  
City State ZIP Code

2.

Name  
Number Street  
City State ZIP Code

2.

Name  
Number Street  
City State ZIP Code

Fill in this information to identify your case:

Debtor 1 Cheryl Louise Williams-Murray  
First Name Middle Name Last Name  
Debtor 2  
(Spouse, if filing) First Name Middle Name Last Name  
United States Bankruptcy Court for the: Southern District of New York  
Case number 19-11705  
(If known)

☐ Check if this is an amended filing

## Official Form 106H

### Schedule H: Your Codebtors

12/15

Codebtors are people or entities who are also liable for any debts you may have. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, and number the entries in the boxes on the left. Attach the Additional Page to this page. On the top of any Additional Pages, write your name and case number (if known). Answer every question.

1. Do you have any codebtors? (If you are filing a joint case, do not list either spouse as a codebtor.)

☒ No

☐ Yes

2. Within the last 8 years, have you lived in a community property state or territory? (Community property states and territories include Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, and Wisconsin.)

☒ No. Go to line 3.

☐ Yes. Did your spouse, former spouse, or legal equivalent live with you at the time?

☒ No

☐ Yes. In which community state or territory did you live? \_\_\_\_\_ Fill in the name and current address of that person.

Name of your spouse, former spouse, or legal equivalent \_\_\_\_\_

Number \_\_\_\_\_ Street \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ ZIP Code \_\_\_\_\_

3. In Column 1, list all of your codebtors. Do not include your spouse as a codebtor if your spouse is filing with you. List the person shown in line 2 again as a codebtor only if that person is a guarantor or cosigner. Make sure you have listed the creditor on Schedule D (Official Form 106D), Schedule E/F (Official Form 106E/F), or Schedule G (Official Form 106G). Use Schedule D, Schedule E/F, or Schedule G to fill out Column 2.

Column 1: Your codebtor

Column 2: The creditor to whom you owe the debt

Check all schedules that apply:

3.1

Name \_\_\_\_\_

Number \_\_\_\_\_ Street \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ ZIP Code \_\_\_\_\_

☐ Schedule D, line \_\_\_\_\_

☐ Schedule E/F, line \_\_\_\_\_

☐ Schedule G, line \_\_\_\_\_

3.2

Name \_\_\_\_\_

Number \_\_\_\_\_ Street \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ ZIP Code \_\_\_\_\_

☐ Schedule D, line \_\_\_\_\_

☐ Schedule E/F, line \_\_\_\_\_

☐ Schedule G, line \_\_\_\_\_

3.3

Name \_\_\_\_\_

Number \_\_\_\_\_ Street \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ ZIP Code \_\_\_\_\_

☐ Schedule D, line \_\_\_\_\_

☐ Schedule E/F, line \_\_\_\_\_

☐ Schedule G, line \_\_\_\_\_

Debtor 1

Cheryl Louise Williams-Murray

First Name

Middle Name

Last Name

Case number (if known) 19-11705

**Additional Page to List More Codebtors**

Column 1: Your codebtor

Column 2: The creditor to whom you owe the debt

Check all schedules that apply:

3.\_

Name

Number

Street

City

State

ZIP Code

☐ Schedule D, line \_\_\_\_\_

☐ Schedule E/F, line \_\_\_\_\_

☐ Schedule G, line \_\_\_\_\_

3.\_

Name

Number

Street

City

State

ZIP Code

☐ Schedule D, line \_\_\_\_\_

☐ Schedule E/F, line \_\_\_\_\_

☐ Schedule G, line \_\_\_\_\_

3.\_

Name

Number

Street

City

State

ZIP Code

☐ Schedule D, line \_\_\_\_\_

☐ Schedule E/F, line \_\_\_\_\_

☐ Schedule G, line \_\_\_\_\_

3.\_

Name

Number

Street

City

State

ZIP Code

☐ Schedule D, line \_\_\_\_\_

☐ Schedule E/F, line \_\_\_\_\_

☐ Schedule G, line \_\_\_\_\_

3.\_

Name

Number

Street

City

State

ZIP Code

☐ Schedule D, line \_\_\_\_\_

☐ Schedule E/F, line \_\_\_\_\_

☐ Schedule G, line \_\_\_\_\_

3.\_

Name

Number

Street

City

State

ZIP Code

☐ Schedule D, line \_\_\_\_\_

☐ Schedule E/F, line \_\_\_\_\_

☐ Schedule G, line \_\_\_\_\_

3.\_

Name

Number

Street

City

State

ZIP Code

☐ Schedule D, line \_\_\_\_\_

☐ Schedule E/F, line \_\_\_\_\_

☐ Schedule G, line \_\_\_\_\_

3.\_

Name

Number

Street

City

State

ZIP Code

☐ Schedule D, line \_\_\_\_\_

☐ Schedule E/F, line \_\_\_\_\_

☐ Schedule G, line \_\_\_\_\_



Fill in this information to identify your case:

Debtor 1 Cheryl Louise Williams-Murray  
First Name Middle Name Last Name

Debtor 2  
(Spouse, if filing) First Name Middle Name Last Name

United States Bankruptcy Court for the: Southern District of New York

Case number 19-11705  
(If known)

Check if this is:

- ☐ An amended filing
- ☐ A supplement showing postpetition chapter 13 income as of the following date:

MM / DD / YYYY

Official Form 106I

## Schedule I: Your Income

12/15

Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

### Part 1: Describe Employment

#### 1. Fill in your employment information.

If you have more than one job, attach a separate page with information about additional employers.

Include part-time, seasonal, or self-employed work.

Occupation may include student or homemaker, if it applies.

#### Employment status

- ☐ Employed
- ☒ Not employed

- ☐ Employed
- ☐ Not employed

#### Occupation

#### Employer's name

#### Employer's address

Number Street

Number Street

City State ZIP Code

City State ZIP Code

How long employed there? \_\_\_\_\_

### Part 2: Give Details About Monthly Income

Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated.

If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form.

|  | For Debtor 1 | For Debtor 2 or non-filing spouse |
|--|--------------|-----------------------------------|
| 2. List monthly gross wages, salary, and commissions (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be. | 2. \$ 0.00   | \$                                |
| 3. Estimate and list monthly overtime pay.   | 3. + \$ 0.00 | + \$                              |
| 4. Calculate gross income. Add line 2 + line 3.  | 4. \$ 0.00   | \$ 0.00                           |

Debtor 1 **Cheryl Louise Williams-Murray**  
First Name Middle Name Last Name

Case number (if known) **19-11705**

|  | For Debtor 1      | For Debtor 2 or non-filing spouse      |
|--|-------------------|--|
| Copy line 4 here..... → 4.   | \$ 0.00           | \$ 0.00                                |
| <b>5. List all payroll deductions:</b>   |                   |  |
| 5a. Tax, Medicare, and Social Security deductions  | 5a. \$ 0.00       | \$                                     |
| 5b. Mandatory contributions for retirement plans   | 5b. \$ 0.00       | \$                                     |
| 5c. Voluntary contributions for retirement plans   | 5c. \$ 0.00       | \$                                     |
| 5d. Required repayments of retirement fund loans   | 5d. \$ 0.00       | \$                                     |
| 5e. Insurance  | 5e. \$ 0.00       | \$                                     |
| 5f. Domestic support obligations   | 5f. \$ 0.00       | \$                                     |
| 5g. Union dues   | 5g. \$ 0.00       | \$                                     |
| 5h. Other deductions. Specify: _____   | 5h. + \$ 0.00     | + \$                                   |
| <b>6. Add the payroll deductions.</b> Add lines 5a + 5b + 5c + 5d + 5e + 5f + 5g + 5h.   | 6. \$ 0.00        | \$                                     |
| <b>7. Calculate total monthly take-home pay.</b> Subtract line 6 from line 4.  | 7. \$ 0.00        | \$                                     |
| <b>8. List all other income regularly received:</b>  |                   |  |
| 8a. Net income from rental property and from operating a business, profession, or farm<br>Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.  | 8a. \$ 0.00       | \$                                     |
| 8b. Interest and dividends   | 8b. \$ 0.00       | \$                                     |
| 8c. Family support payments that you, a non-filing spouse, or a dependent regularly receive<br>Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.  | 8c. \$ 0.00       | \$                                     |
| 8d. Unemployment compensation  | 8d. \$ 0.00       | \$                                     |
| 8e. Social Security  | 8e. \$ 1,116.00   | \$                                     |
| 8f. Other government assistance that you regularly receive<br>Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies.<br>Specify: <u>Contributions to cover bills; Verizon &amp; Sprint</u>   | 8f. \$ 192.00     | \$                                     |
| 8g. Pension or retirement income   | 8g. \$ 0.00       | \$                                     |
| 8h. Other monthly income. Specify: <u>gigs; childcare, cleaning</u>  | 8h. + \$ 100.00   | + \$                                   |
| <b>9. Add all other income.</b> Add lines 8a + 8b + 8c + 8d + 8e + 8f + 8g + 8h.   | 9. \$ 1,408.00    | \$                                     |
| <b>10. Calculate monthly income.</b> Add line 7 + line 9.<br>Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.  | 10. \$ 1,408.00 + | \$ = \$ 1,408.00                       |
| <b>11. State all other regular contributions to the expenses that you list in Schedule J.</b><br>Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives.<br>Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J.<br>Specify: <u>Contributions to cover bills; Verizon &amp; Sprint</u> |                   |  |
|  | 11. + \$          | 209.00                                 |
| <b>12. Add the amount in the last column of line 10 to the amount in line 11.</b> The result is the combined monthly income.<br>Write that amount on the <i>Summary of Your Assets and Liabilities and Certain Statistical Information</i> , if it applies   | 12.               | \$ 1,617.00<br>Combined monthly income |
| <b>13. Do you expect an increase or decrease within the year after you file this form?</b><br><input type="checkbox"/> No.<br><input checked="" type="checkbox"/> Yes. Explain: <u>US Dept. of education may take 15% of my social security benefits (167.40)</u>  |                   |  |

page 39

Debtor 1 **Cheryl Louise Williams-Murray**  
First Name Middle Name Last Name

Case number (if known) **19-11705**

**Your expenses**

|   |      |    |        |
|---|------|----|--------|
| 5. Additional mortgage payments for your residence, such as home equity loans   | 5.   | \$ |        |
| 6. Utilities:   |      |    |        |
| 6a. Electricity, heat, natural gas  | 6a.  | \$ | 75.00  |
| 6b. Water, sewer, garbage collection  | 6b.  | \$ |        |
| 6c. Telephone, cell phone, Internet, satellite, and cable services  | 6c.  | \$ | 100.00 |
| 6d. Other. Specify: <u>Verizon</u>  | 6d.  | \$ | 109.00 |
| 7. Food and housekeeping supplies   | 7.   | \$ | 400.00 |
| 8. Childcare and children's education costs   | 8.   | \$ |        |
| 9. Clothing, laundry, and dry cleaning  | 9.   | \$ | 80.00  |
| 10. Personal care products and services   | 10.  | \$ | 50     |
| 11. Medical and dental expenses   | 11.  | \$ |        |
| 12. Transportation. Include gas, maintenance, bus or train fare.<br>Do not include car payments.  | 12.  | \$ | 50     |
| 13. Entertainment, clubs, recreation, newspapers, magazines, and books  | 13.  | \$ |        |
| 14. Charitable contributions and religious donations  | 14.  | \$ |        |
| 15. Insurance.<br>Do not include insurance deducted from your pay or included in lines 4 or 20.   |      |    |        |
| 15a. Life insurance   | 15a. | \$ |        |
| 15b. Health insurance   | 15b. | \$ |        |
| 15c. Vehicle insurance  | 15c. | \$ |        |
| 15d. Other insurance. Specify: _____  | 15d. | \$ |        |
| 16. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20.<br>Specify: _____  | 16.  | \$ |        |
| 17. Installment or lease payments:  |      |    |        |
| 17a. Car payments for Vehicle 1   | 17a. | \$ |        |
| 17b. Car payments for Vehicle 2   | 17b. | \$ |        |
| 17c. Other. Specify: _____  | 17c. | \$ |        |
| 17d. Other. Specify: _____  | 17d. | \$ |        |
| 18. Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I). | 18.  | \$ |        |
| 19. Other payments you make to support others who do not live with you.<br>Specify: _____   | 19.  | \$ |        |
| 20. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income.   |      |    |        |
| 20a. Mortgages on other property  | 20a. | \$ |        |
| 20b. Real estate taxes  | 20b. | \$ |        |
| 20c. Property, homeowner's, or renter's insurance   | 20c. | \$ |        |
| 20d. Maintenance, repair, and upkeep expenses   | 20d. | \$ |        |
| 20e. Homeowner's association or condominium dues  | 20e. | \$ |        |

Debtor 1 **Cheryl Louise Williams-Murray**  
First Name Middle Name Last Name

Case number (if known) **19-11705**

21. Other. Specify: \_\_\_\_\_

21. +\$ \_\_\_\_\_

**22. Calculate your monthly expenses.**

22a. Add lines 4 through 21.

22a. \$ -2,191.00

22b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2

22b. \$ 0.00

22c. Add line 22a and 22b. The result is your monthly expenses.

22c. \$ 2,191.00

**23. Calculate your monthly net income.**

23a. Copy line 12 (your combined monthly income) from Schedule I.

23a. \$ 1,617.00

23b. Copy your monthly expenses from line 22c above.

23b. -\$ 2,191.00

23c. Subtract your monthly expenses from your monthly income.  
The result is your *monthly net income*.

23c. \$ -574.00

**24. Do you expect an increase or decrease in your expenses within the year after you file this form?**

For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease because of a modification to the terms of your mortgage?

☒ No.

☐ Yes.

Explain here:

Fill in this information to identify your case:

Debtor 1 Cheryl Louise Williams-Murray  
First Name Middle Name Last Name  
Debtor 2  
(Spouse, if filing) First Name Middle Name Last Name  
United States Bankruptcy Court for the: Southern District of New York (State)  
Case number 19-11705  
(If known)

☒ Check if this is an amended filing

Official Form 106Dec

## Declaration About an Individual Debtor's Schedules

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

### Sign Below

Did you pay or agree to pay someone who is NOT an attorney to help you fill out bankruptcy forms?

☒ No

☐ Yes. Name of person \_\_\_\_\_ Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

Under penalty of perjury, I declare that I have read the summary and schedules filed with this declaration and that they are true and correct.

Signature of Debtor 1

Signature of Debtor 2

Date June 10, 2019  
MM / DD / YYYY

Date \_\_\_\_\_  
MM / DD / YYYY



Fill in this information to identify your case:

Debtor 1 Cheryl Louise Williams Murray  
First Name Middle Name Last Name

Debtor 2  
(Spouse, if filing) First Name Middle Name Last Name

United States Bankruptcy Court for the: Southern District of New York

Case number 19-11705  
(If known)

☐ Check if this is an amended filing

## Official Form 107

### Statement of Financial Affairs for Individuals Filing for Bankruptcy

04/19

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

#### Part 1: Give Details About Your Marital Status and Where You Lived Before

1. What is your current marital status?

- ☐ Married  
☒ Not married

2. During the last 3 years, have you lived anywhere other than where you live now?

- ☒ No  
☐ Yes. List all of the places you lived in the last 3 years. Do not include where you live now.

| Debtor 1:           | Dates Debtor 1 lived there | Debtor 2:                                 | Dates Debtor 2 lived there                |
|---------------------|----------------------------|---|---|
|                     |                            | <input type="checkbox"/> Same as Debtor 1 | <input type="checkbox"/> Same as Debtor 1 |
| Number Street       | From To                    | Number Street                             | From To                                   |
| City State ZIP Code |                            | City State ZIP Code                       |   |
|                     |                            | <input type="checkbox"/> Same as Debtor 1 | <input type="checkbox"/> Same as Debtor 1 |
| Number Street       | From To                    | Number Street                             | From To                                   |
| City State ZIP Code |                            | City State ZIP Code                       |   |

3. Within the last 8 years, did you ever live with a spouse or legal equivalent in a community property state or territory? (Community property states and territories include Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, and Wisconsin.)

- ☒ No  
☐ Yes. Make sure you fill out *Schedule H: Your Creditors* (Official Form 106H).

#### Part 2: Explain the Sources of Your Income

Debtor 1

Cheryl Louise Williams-Murray

First Name Middle Name Last Name

Case number (if known) 19-11705

4. Did you have any income from employment or from operating a business during this year or the two previous calendar years?

Fill in the total amount of income you received from all jobs and all businesses, including part-time activities.

If you are filing a joint case and you have income that you receive together, list it only once under Debtor 1.

☒ No

☐ Yes. Fill in the details.

|   | Debtor 1  | Debtor 2  |
|---|---|---|
|   | Sources of income<br>Check all that apply.  | Sources of income<br>Check all that apply.  |
|   | Gross income<br>(before deductions and exclusions)  | Gross income<br>(before deductions and exclusions)  |
| From January 1 of current year until the date you filed for bankruptcy: | <input type="checkbox"/> Wages, commissions, bonuses, tips<br><input type="checkbox"/> Operating a business | <input type="checkbox"/> Wages, commissions, bonuses, tips<br><input type="checkbox"/> Operating a business |
| For last calendar year:<br>(January 1 to December 31, 2018)             | <input type="checkbox"/> Wages, commissions, bonuses, tips<br><input type="checkbox"/> Operating a business | <input type="checkbox"/> Wages, commissions, bonuses, tips<br><input type="checkbox"/> Operating a business |
| For the calendar year before that:<br>(January 1 to December 31, 2017)  | <input type="checkbox"/> Wages, commissions, bonuses, tips<br><input type="checkbox"/> Operating a business | <input type="checkbox"/> Wages, commissions, bonuses, tips<br><input type="checkbox"/> Operating a business |

5. Did you receive any other income during this year or the two previous calendar years?

Include income regardless of whether that income is taxable. Examples of *other income* are alimony; child support; Social Security, unemployment, and other public benefit payments; pensions; rental income; interest; dividends; money collected from lawsuits; royalties; and gambling and lottery winnings. If you are filing a joint case and you have income that you received together, list it only once under Debtor 1.

List each source and the gross income from each source separately. Do not include income that you listed in line 4.

☐ No

☒ Yes. Fill in the details.

|   | Debtor 1  | Debtor 2  |
|---|---|---|
|   | Sources of income<br>Describe below.                                | Sources of income<br>Describe below.                                |
|   | Gross income from each source<br>(before deductions and exclusions) | Gross income from each source<br>(before deductions and exclusions) |
| From January 1 of current year until the date you filed for bankruptcy: | Social Security \$ 5,580<br>SNAP \$ 960                             |   |
| For last calendar year:<br>(January 1 to December 31, 2018)             | Social Security \$ 13,007<br>SNAP \$ 2,304<br>Other \$ 900          |   |
| For the calendar year before that:<br>(January 1 to December 31, 2017)  | Social Security \$ 9,459<br>SNAP \$ 2,304                           |   |

Debtor 1

Cheryl Louise Williams-Murray

First Name Middle Name Last Name

Case number (if known) 19-11705

**Part 3: List Certain Payments You Made Before You Filed for Bankruptcy**

**6. Are either Debtor 1's or Debtor 2's debts primarily consumer debts?**

- ☐ No. Neither Debtor 1 nor Debtor 2 has primarily consumer debts. *Consumer debts* are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$6,825\* or more?

- ☐ No. Go to line 7.

- ☐ Yes. List below each creditor to whom you paid a total of \$6,825\* or more in one or more payments and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case.

\* Subject to adjustment on 4/01/22 and every 3 years after that for cases filed on or after the date of adjustment.

- ☒ Yes. Debtor 1 or Debtor 2 or both have primarily consumer debts.

During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more?

- ☒ No. Go to line 7.

- ☐ Yes. List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case.

|                                       | Dates of payment | Total amount paid | Amount you still owe | Was this payment for...                       |
|---------------------------------------|------------------|-------------------|----------------------|---|
| Creditor's Name _____                 | _____            | \$ _____          | \$ _____             | <input type="checkbox"/> Mortgage             |
| Number _____ Street _____             | _____            |                   |                      | <input type="checkbox"/> Car                  |
| _____                                 | _____            |                   |                      | <input type="checkbox"/> Credit card          |
| City _____ State _____ ZIP Code _____ |                  |                   |                      | <input type="checkbox"/> Loan repayment       |
|                                       |                  |                   |                      | <input type="checkbox"/> Suppliers or vendors |
|                                       |                  |                   |                      | <input type="checkbox"/> Other _____          |
| Creditor's Name _____                 | _____            | \$ _____          | \$ _____             | <input type="checkbox"/> Mortgage             |
| Number _____ Street _____             | _____            |                   |                      | <input type="checkbox"/> Car                  |
| _____                                 | _____            |                   |                      | <input type="checkbox"/> Credit card          |
| City _____ State _____ ZIP Code _____ |                  |                   |                      | <input type="checkbox"/> Loan repayment       |
|                                       |                  |                   |                      | <input type="checkbox"/> Suppliers or vendors |
|                                       |                  |                   |                      | <input type="checkbox"/> Other _____          |
| Creditor's Name _____                 | _____            | \$ _____          | \$ _____             | <input type="checkbox"/> Mortgage             |
| Number _____ Street _____             | _____            |                   |                      | <input type="checkbox"/> Car                  |
| _____                                 | _____            |                   |                      | <input type="checkbox"/> Credit card          |
| City _____ State _____ ZIP Code _____ |                  |                   |                      | <input type="checkbox"/> Loan repayment       |
|                                       |                  |                   |                      | <input type="checkbox"/> Suppliers or vendors |
|                                       |                  |                   |                      | <input type="checkbox"/> Other _____          |

Debtor 1 Cheryl Louise Williams-Murray Case number (if known) 19-11705  
First Name Middle Name Last Name

**Part 4: Identify Legal Actions, Repossessions, and Foreclosures**

**9. Within 1 year before you filed for bankruptcy, were you a party in any lawsuit, court action, or administrative proceeding?**

List all such matters, including personal injury cases, small claims actions, divorces, collection suits, paternity actions, support or custody modifications, and contract disputes.

- ☐ No  
☒ Yes. Fill in the details.

| Nature of the case   | Court or agency  | Status of the case   |
|--|--|--|
| <p>Case title <u>Michael Murray &amp; Cheryl Williams-Murray</u><br/><u>against 675 Walton Ave Inc</u></p> <p>Case number <u>301090/17</u></p> | <p>Supreme Court of the State of New York, County of Bronx</p> <p>Court Name <u>851 Grand Concourse</u></p> <p>Number Street <u>Bronx, NY 10451</u></p> <p>City State ZIP Code</p> | <p><input checked="" type="checkbox"/> Pending<br/><input type="checkbox"/> On appeal<br/><input type="checkbox"/> Concluded</p> |
| <p>Case title _____</p> <p>Case number _____</p>   | <p>Court Name _____</p> <p>Number Street _____</p> <p>City State ZIP Code _____</p>  | <p><input type="checkbox"/> Pending<br/><input type="checkbox"/> On appeal<br/><input type="checkbox"/> Concluded</p>            |

*Alleged Flood damage, maintenance arrears legal fees divorce - 2014 late fees since 2009*

**10. Within 1 year before you filed for bankruptcy, was any of your property repossessed, foreclosed, garnished, attached, seized, or levied?**  
Check all that apply and fill in the details below.

- ☐ No. Go to line 11.  
☒ Yes. Fill in the information below.

675 Walton Ave Inc  
Creditor's Name  
551 5th Ave, Suite 500  
Number Street

Greenthal Property Management  
New York, NY 10176  
City State ZIP Code

Describe the property 3 bedroom 2 bath cooperative apartment Date Value of the property  
\$ 500,000

- Explain what happened
- ☐ Property was repossessed.  
☐ Property was foreclosed.  
☐ Property was garnished.  
☒ Property was attached, seized, or levied.

Creditor's Name \_\_\_\_\_  
Number Street \_\_\_\_\_  
City State ZIP Code \_\_\_\_\_

Describe the property \_\_\_\_\_ Date Value of the property  
\$ \_\_\_\_\_

- Explain what happened
- ☐ Property was repossessed.  
☐ Property was foreclosed.  
☐ Property was garnished.  
☐ Property was attached, seized, or levied.

Debtor 1

**Cheryl Louise Williams-Murray**

First Name Middle Name Last Name

Case number (if known) **19-11705**

11. Within 90 days before you filed for bankruptcy, did any creditor, including a bank or financial institution, set off any amounts from your accounts or refuse to make a payment because you owed a debt?

- ☒ No  
☐ Yes. Fill in the details.

| Creditor's Name  | Describe the action the creditor took | Date action was taken | Amount   |
|--|---------------------------------------|-----------------------|----------|
| Number _____ Street _____<br>City _____ State _____ ZIP Code _____ |                                       |                       | \$ _____ |

Last 4 digits of account number: XXXX- \_\_\_\_\_

12. Within 1 year before you filed for bankruptcy, was any of your property in the possession of an assignee for the benefit of creditors, a court-appointed receiver, a custodian, or another official?

- ☒ No  
☐ Yes

**Part 5: List Certain Gifts and Contributions**

13. Within 2 years before you filed for bankruptcy, did you give any gifts with a total value of more than \$600 per person?

- ☒ No  
☐ Yes. Fill in the details for each gift.

| Gifts with a total value of more than \$600 per person   | Describe the gifts | Dates you gave the gifts | Value    |
|--|--------------------|--------------------------|----------|
| Person to Whom You Gave the Gift _____<br>Number _____ Street _____<br>City _____ State _____ ZIP Code _____<br>Person's relationship to you _____ |                    |                          | \$ _____ |
| Person to Whom You Gave the Gift _____<br>Number _____ Street _____<br>City _____ State _____ ZIP Code _____<br>Person's relationship to you _____ |                    |                          | \$ _____ |

Debtor 1

**Cheryl Louise Williams-Murray**

First Name Middle Name Last Name

Case number (if known) **19-11705**

14. Within 2 years before you filed for bankruptcy, did you give any gifts or contributions with a total value of more than \$600 to any charity?

☒ No

☐ Yes. Fill in the details for each gift or contribution.

| Gifts or contributions to charities that total more than \$600 | Describe what you contributed | Date you contributed | Value |
|--|-------------------------------|----------------------|-------|
| Charity's Name   |                               |                      | \$    |
|  |                               |                      | \$    |
| Number Street  |                               |                      |       |
| City State ZIP Code  |                               |                      |       |

**Part 6: List Certain Losses**

15. Within 1 year before you filed for bankruptcy or since you filed for bankruptcy, did you lose anything because of theft, fire, other disaster, or gambling?

☒ No

☐ Yes. Fill in the details.

| Describe the property you lost and how the loss occurred | Describe any insurance coverage for the loss<br>Include the amount that insurance has paid. List pending insurance claims on Line 33 of Schedule A/B: Property. | Date of your loss | Value of property lost |
|--|---|-------------------|------------------------|
|  |   |                   | \$                     |

**Part 7: List Certain Payments or Transfers**

16. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone you consulted about seeking bankruptcy or preparing a bankruptcy petition?

Include any attorneys, bankruptcy petition preparers, or credit counseling agencies for services required in your bankruptcy.

☒ No

☐ Yes. Fill in the details.

| Person Who Was Paid                     | Description and value of any property transferred | Date payment or transfer was made | Amount of payment |
|---|---|-----------------------------------|-------------------|
| Number Street                           |   |                                   | \$                |
|   |   |                                   | \$                |
| City State ZIP Code                     |   |                                   |                   |
| Email or website address                |   |                                   |                   |
| Person Who Made the Payment, if Not You |   |                                   |                   |



Debtor 1 **Cheryl Louise Williams-Murray**  
First Name Middle Name Last Name

Case number (if known) **19-11705**

| Description and value of any property transferred  |  | Date payment or transfer was made | Amount of payment |
|--|--|-----------------------------------|-------------------|
| Person Who Was Paid<br><br>Number Street<br><br><br>City State ZIP Code<br><br>Email or website address<br><br>Person Who Made the Payment, if Not You |  |                                   | \$                |
|  |  |                                   | \$                |

**17. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone who promised to help you deal with your creditors or to make payments to your creditors?**  
Do not include any payment or transfer that you listed on line 16.

- ☒ No  
☐ Yes. Fill in the details.

| Description and value of any property transferred                       |  | Date payment or transfer was made | Amount of payment |
|---|--|-----------------------------------|-------------------|
| Person Who Was Paid<br><br>Number Street<br><br><br>City State ZIP Code |  |                                   | \$                |
|   |  |                                   | \$                |

**18. Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property transferred in the ordinary course of your business or financial affairs?**

Include both outright transfers and transfers made as security (such as the granting of a security interest or mortgage on your property).  
Do not include gifts and transfers that you have already listed on this statement.

- ☐ No  
☐ Yes. Fill in the details.

| Description and value of property transferred  | Describe any property or payments received or debts paid in exchange | Date transfer was made |
|--|--|------------------------|
| Person Who Received Transfer<br><br>Number Street<br><br><br>City State ZIP Code<br><br>Person's relationship to you |  |                        |
| Person Who Received Transfer<br><br>Number Street<br><br><br>City State ZIP Code<br><br>Person's relationship to you |  |                        |

Debtor 1

Cheryl Louise Williams-Murray

First Name Middle Name Last Name

Case number (if known) 19-11705

19. Within 10 years before you filed for bankruptcy, did you transfer any property to a self-settled trust or similar device of which you are a beneficiary? (These are often called *asset-protection devices*.)

- ☒ No  
☐ Yes. Fill in the details.

| Name of trust | Description and value of the property transferred | Date transfer was made |
|---------------|---|------------------------|
|               |   |                        |

**Part 8: List Certain Financial Accounts, Instruments, Safe Deposit Boxes, and Storage Units**

20. Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed, sold, moved, or transferred?

Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions.

- ☒ No  
☐ Yes. Fill in the details.

| Name of Financial Institution   | Last 4 digits of account number | Type of account or instrument  | Date account was closed, sold, moved, or transferred | Last balance before closing or transfer |
|---|---------------------------------|--|--|---|
| Name of Financial Institution<br>Number Street<br>City State ZIP Code | XXXX- - - -                     | <input type="checkbox"/> Checking<br><input type="checkbox"/> Savings<br><input type="checkbox"/> Money market<br><input type="checkbox"/> Brokerage<br><input type="checkbox"/> Other |  | \$                                      |
| Name of Financial Institution<br>Number Street<br>City State ZIP Code | XXXX- - - -                     | <input type="checkbox"/> Checking<br><input type="checkbox"/> Savings<br><input type="checkbox"/> Money market<br><input type="checkbox"/> Brokerage<br><input type="checkbox"/> Other |  | \$                                      |

21. Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities, cash, or other valuables?

- ☐ No  
☐ Yes. Fill in the details.

| Name of Financial Institution   | Who else had access to it?                   | Describe the contents | Do you still have it?                                       |
|---|--|-----------------------|---|
| Name of Financial Institution<br>Number Street<br>City State ZIP Code | Name<br>Number Street<br>City State ZIP Code |                       | <input type="checkbox"/> No<br><input type="checkbox"/> Yes |

Debtor 1

Cheryl Louise Williams-Murray

First Name Middle Name Last Name

Case number (if known) 19-11705

22. Have you stored property in a storage unit or place other than your home within 1 year before you filed for bankruptcy?

☒ No

☐ Yes. Fill in the details.

| Who else has or had access to it? |                     | Describe the contents | Do you still have it?                                       |
|-----------------------------------|---------------------|-----------------------|---|
| Name of Storage Facility          | Name                |                       | <input type="checkbox"/> No<br><input type="checkbox"/> Yes |
| Number Street                     | Number Street       |                       |   |
| City State ZIP Code               | City State ZIP Code |                       |   |
|                                   |                     |                       |   |

**Part 9: Identify Property You Hold or Control for Someone Else**

23. Do you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or hold in trust for someone.

☒ No

☐ Yes. Fill in the details.

| Where is the property? |                     | Describe the property | Value |
|------------------------|---------------------|-----------------------|-------|
| Owner's Name           |                     |                       | \$    |
| Number Street          | Number Street       |                       |       |
| City State ZIP Code    | City State ZIP Code |                       |       |
|                        |                     |                       |       |

**Part 10: Give Details About Environmental Information**

For the purpose of Part 10, the following definitions apply:

- Environmental law** means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material.
- Site** means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites.
- Hazardous material** means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term.

Report all notices, releases, and proceedings that you know about, regardless of when they occurred.

24. Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law?

☒ No

☐ Yes. Fill in the details.

| Governmental unit   | Environmental law, if you know it | Date of notice |
|---------------------|-----------------------------------|----------------|
| Name of site        |                                   |                |
| Number Street       |                                   |                |
| City State ZIP Code |                                   |                |
|                     |                                   |                |

Debtor 1

Cheryl Louise Williams-Murray

First Name Middle Name Last Name

Case number (if known) 19-11705

25. Have you notified any governmental unit of any release of hazardous material?

- ☒ No  
☐ Yes. Fill in the details.

| Governmental unit |                     | Environmental law, if you know it | Date of notice |
|-------------------|---------------------|-----------------------------------|----------------|
| Name of site      | Governmental unit   |                                   |                |
| Number Street     | Number Street       |                                   |                |
|                   | City State ZIP Code |                                   |                |
| City              | State ZIP Code      |                                   |                |

26. Have you been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders.

- ☒ No  
☐ Yes. Fill in the details.

| Court or agency | Nature of the case | Status of the case                 |
|-----------------|--------------------|------------------------------------|
| Case title      |                    | <input type="checkbox"/> Pending   |
| Court Name      |                    | <input type="checkbox"/> On appeal |
| Number Street   |                    | <input type="checkbox"/> Concluded |
| Case number     | NY                 |                                    |
| City            | State ZIP Code     |                                    |

**Part 11: Give Details About Your Business or Connections to Any Business**

27. Within 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any business?

- ☐ A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time  
☐ A member of a limited liability company (LLC) or limited liability partnership (LLP)  
☐ A partner in a partnership  
☐ An officer, director, or managing executive of a corporation  
☐ An owner of at least 5% of the voting or equity securities of a corporation

- ☒ No. None of the above applies. Go to Part 12.  
☐ Yes. Check all that apply above and fill in the details below for each business.

|   |                                     |  |
|---|-------------------------------------|--|
| Business Name<br><br>Number Street<br><br>City State ZIP Code | Describe the nature of the business | Employer Identification number<br>Do not include Social Security number or ITIN. |
|   |                                     | EIN: _____   |
|   | Name of accountant or bookkeeper    | Dates business existed   |
|   |                                     | From _____ To _____  |
| Business Name<br><br>Number Street<br><br>City State ZIP Code | Describe the nature of the business | Employer Identification number<br>Do not include Social Security number or ITIN. |
|   |                                     | EIN: _____   |
|   | Name of accountant or bookkeeper    | Dates business existed   |
|   |                                     | From _____ To _____  |

Debtor 1

First Name Middle Name Last Name

Case number (if known)

Business Name

Number Street

City State ZIP Code

Describe the nature of the business

Employer Identification number

Do not include Social Security number or ITIN.

EIN: - - - - -

Name of accountant or bookkeeper

Dates business existed

From To

28. Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties.

☒ No

☐ Yes. Fill in the details below.

Date issued

Name

MM / DD / YYYY

Number Street

City State ZIP Code

**Part 12: Sign Below**

I have read the answers on this *Statement of Financial Affairs* and any attachments, and I declare under penalty of perjury that the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1343, and 3571.

Signature of Debtor 1

Signature of Debtor 2

Date 6/10/19

Date

Did you attach additional pages to *Your Statement of Financial Affairs for Individuals Filing for Bankruptcy* (Official Form 107)?

☒ No

☐ Yes

Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms?

☒ No

☐ Yes. Name of person

Attach the *Bankruptcy Petition Preparer's Notice, Declaration, and Signature* (Official Form 119).

Cheryl Williams-Murray  
675 Walton Ave Apartment 2B  
Bronx, NY 10451

FILED  
U.S. BANKRUPTCY COURT

2019 JUN 14 A 11:31

S.D.N.Y.

To whom it may concern,

The related pending case, Michael Murray & Cheryl L. Williams-Murray v. 675 Walton Ave Inc - Case no.301090/17 in the Bronx Supreme Court alleges a past due balance of ~\$76,440 (flood damages, repairs, maintenance arrears, legal & late fees) which may be offset or discharged entirely. If I am found to owe some past due maintenance/rent on Apartment 2B to 675 Walton Ave Inc., the local Department of Social Services has offered me a 'one shot deal' not to exceed \$30,000 in the form of a zero interest loan to be repaid upon sale or transfer of ownership. I have not yet established how much maintenance, if any, went unpaid.

  
Cheryl Williams-Murray

  
Date June 10, 2019